	Application or Docket Number
PATENT APPLICATION FEE DETERMINATION RECORD	

Effective October 1, 2000

CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY TYPE			OTHER THAN R SMALL ENTITY			
TOTAL CLAIMS			28					RATE	FEE	1	RATE	FEE
FOR			NUMBER	FILED	NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS 28 minus 20=					* (	8		X\$ 9=	72	OR	X\$18=	
IND	EPENDENT CL	_AIMS	4 mi	nus 3 =	•			X40=	39	OR	X80=	
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT					+135=		OR	+270=	
* If	the difference	in column 1 is	less than ze	ero, enter	"0" in c	olumn 2	ı	TOTAL	456	OR	TOTAL	
	С	LAIMS AS A	MENDED	- PAR	T II			701712	400	1011	OTHER	THAN
		(Column 1)		(Colur		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	,
AME	Independent	<u> </u>	Minus	***		=	Ī	X40=		OR	X80=	
Ĺ	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENT	CLAIM			+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur	mn 2)	(Column 3)	_ ′	10011.1 22		• .		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	. 18	Minus	2	8	=		X\$ 9=	: 	OR	X\$18=	,
AME	Independent	NTATION OF MI	Minus	*** (	CLAIM	= -		X40=		OR	X80=	
<u> </u>	FINOT PRESE	NIATION OF ME	JETIPLE DEF	ENDENT	CLAIIVI			+135=		OR	+270=	
							_	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDW	Total	. 8	Minus	** 2	8	=		X\$ 9=		OR	X\$18=	
AME	Independent	. 8	Minus	***	<u> </u>	=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	'ENDENT	CLAIM	T	-	.105	$\overline{}$		. 070	/
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application of	or Docket	Numbe
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CLAIMS AS FILED - PART I (Column 1) (Column 2)					SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY				
TOTAL CLAIMS		10		(Coldini 2)		ŗ	RATE FEE		OR 1 I	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		-	BASIC FEE		_	BASIC FEE	710.00
			0.0		NUMBER EXTRA		ŀ	JASIC I LL		OR	DAGIO FEE	710.00
	TAL CHARGEA	ABLE CLAIMS	// mir	nus 20=	<u>* &amp;</u>			X\$ 9=	72	OR	X\$18=	
IND	EPENDENT CL	_AIMS	4 minus 3 = * /					X40=	40	OR	X80=	:
MULTIPLE DEPENDENT CLAIM PRESENT							Ī	+135=		OR	+270=	
* If	* If the difference in column 1 is less than zero, enter "0" in column 2					olumn 2		TOTAL	401	OR	TOTAL	
	C	LAIMS AS A	MENDE	) - PAR	ΤII					•	OTHER	THAN
		(Column 1)	The same of the sa	(Colun		(Column 3)	_	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		- CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDS	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEI	PENDENT	CLAIM			.105		1	+270=	
							L	+135=		OR	TOTAL	
							A	DDIT. FEE		OR	ADDIT. FEE	
		(Column 1) CLAIMS	1	(Colun		(Column 3)	_					
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	F	X40=		OR	X80=	
L	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		┟	+135=			+270=	
							L	TOTAL		OR	TOTAL	
							Αľ	DDIT. FEE		OR	ADDIT. FEE	
_	;	(Column 1) CLAIMS		(Colun		(Column 3)	_					
AMENDMENT C		REMAINING AFTER AMENDMENT		NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	1 2 2
	Independent	*	Minus	***		=	┢	X40=			X80=	
⋖	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		┢	A40=		OR	X60=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT FEE												
	***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											